

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

VFW Political Action Committee

ADDRESS (number and street)

200 Maryland Avenue NE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20002

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00113001

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 1

2 8

2 0 0 6

through

1 2

3 1

2 0 0 6

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Frank Lightowler

Signature of Treasurer

Electronically Filed by Frank Lightowler

Date

0 1

1 6

2 0 0 7

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
VFW Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	8	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		1106678.20
(b) Cash on Hand at Beginning of Reporting Period .....	991483.48	
(c) Total Receipts (from Line 19) .....	16932.86	511338.54
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1008416.34	1618016.74
7. Total Disbursements (from Line 31) .....	16100.98	625701.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	992315.36	992315.36
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

VFW Political Action Committee

Report Covering the Period:

From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3189.98	33345.10
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	13742.88	474993.44
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	16932.86	508338.54
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	16932.86	508338.54
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	16932.86	511338.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16932.86	511338.54

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		16100.98	312701.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡		16100.98	312701.38
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	313000.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		16100.98	625701.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		16100.98	625701.38

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	16932.86	508338.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16932.86	508338.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16100.98	312701.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16100.98	312701.38

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank Mailing Address NC8502 P.O. Box 563966 City Charlotte State NC Zip Code 28262-3966 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wachovia Bank Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 21945.03			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.7765 Amount of Each Receipt this Period 605.02 Money Market acct interest 12/06 (9462)
<b>B.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank Mailing Address NC8502 P.O. Box 563966 City Charlotte State NC Zip Code 28262-3966 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wachovia Bank Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 22949.49			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.7766 Amount of Each Receipt this Period 1004.46 Money Market Acct. Interest 12-06 (2891)
<b>C.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank Mailing Address NC8502 P.O. Box 563966 City Charlotte State NC Zip Code 28262-3966 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wachovia Bank Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 22960.46			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.7767 Amount of Each Receipt this Period 10.97 Checking account interest 11/06

**SUBTOTAL** of Receipts This Page (optional) .....

1620.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	0		2	0	0	6													
Mailing Address NC8502 P.O. Box 563966		<b>Transaction ID:</b> SA11A1.7783																				
City State Zip Code Charlotte NC 28262-3966		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">972.87</div>																				
FEC ID number of contributing federal political committee. <b>C</b>		Money Market Interest 12-06 (2891)																				
Name of Employer Wachovia Bank	Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">23933.33</div>																					

<b>B.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	0		2	0	0	6													
Mailing Address NC8502 P.O. Box 563966		<b>Transaction ID:</b> SA11A1.7792																				
City State Zip Code Charlotte NC 28262-3966		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">585.90</div>																				
FEC ID number of contributing federal political committee. <b>C</b>																						
Name of Employer Wachovia Bank	Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">24519.23</div>																					

<b>C.</b> Full Name (Last, First, Middle Initial) National Association Wachovia Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	1		2	0	0	6													
Mailing Address NC8502 P.O. Box 563966		<b>Transaction ID:</b> SA11A1.7784																				
City State Zip Code Charlotte NC 28262-3966		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">10.76</div>																				
FEC ID number of contributing federal political committee. <b>C</b>		Checking Account interest 12-06																				
Name of Employer Wachovia Bank	Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">24529.99</div>																					

**SUBTOTAL** of Receipts This Page (optional) .....

**1569.53**

**TOTAL** This Period (last page this line number only) .....

**3189.98**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Business Service AT&T**

Mailing Address PO Box 2969

City  
OmahaState  
NEZip Code  
68103-2969

Purpose of Disbursement

Phone Service

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.7788

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	6

Amount of Each Disbursement this Period

251.99

Full Name (Last, First, Middle Initial)

**B. Salvatore J. Capirchio**

Mailing Address 9 Wellspring Drive

City  
CranstonState  
RIZip Code  
02920

Purpose of Disbursement

Office Duties

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.7775

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	6

Amount of Each Disbursement this Period

657.60

Full Name (Last, First, Middle Initial)

**C. Salvatore J. Capirchio**

Mailing Address 9 Wellspring Drive

City  
CranstonState  
RIZip Code  
02920

Purpose of Disbursement

Director Working from Home

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.7776

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	6

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional) .....

1509.99

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Salvatore J. Capirchio

Mailing Address 9 Wellspring Drive

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Office Duties (Director)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

657.60

Full Name (Last, First, Middle Initial)

**B.** Spring Water Deer Park

Mailing Address P. O. Box 52271

City Phoenix State AZ Zip Code 85072-2271

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7762

Date of Disbursement

/   /

Amount of Each Disbursement this Period

46.94

Full Name (Last, First, Middle Initial)

**C.** Spring Water Deer Park

Mailing Address P. O. Box 52271

City Phoenix State AZ Zip Code 85072-2271

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.7777

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.60

**SUBTOTAL** of Disbursements This Page (optional) .....

734.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

## **A. Financial Services De lage landen**

Mailing Address P O Box 41601

City  
Philadelphia

State  
PA

Zip Code  
19101-1601

Purpose of Disbursement  
Equipment maintenance (mail machine)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

290.04

Full Name (Last, First, Middle Initial)

## **B. Tallman Insurance Agency**

Mailing Address 406 W. 34th Street  
Suite 806 - VFW Building

City  
Kansas City

State  
MO

Zip Code  
64111-2796

Purpose of Disbursement  
Insurance Policy

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

273.00

Full Name (Last, First, Middle Initial)

## **C. Inc OCE Imagistics**

Mailing Address P O Box 856193

City  
Louisville

State  
KY

Zip Code  
40285

Purpose of Disbursement  
Equipment rental/maintenance (copier)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

176.72

**SUBTOTAL** of Disbursements This Page (optional) .....

739.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Inc OCE Imagistics

Mailing Address P O Box 856193

City  
Louisville

State  
KY

Zip Code  
40285

Purpose of Disbursement  
Copier Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7772

Date of Disbursement

/   /

Amount of Each Disbursement this Period

171.59

Full Name (Last, First, Middle Initial)

**B.** for Business Platinum Plus

Mailing Address PO Box 15469

City  
Wilmington

State  
DE

Zip Code  
19866-5469

Purpose of Disbursement  
interest

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**C.** PCS SPRINT

Mailing Address P O Box 62012

City  
Baltimore

State  
MD

Zip Code  
21264-2012

Purpose of Disbursement  
Director's phone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

94.12

**SUBTOTAL** of Disbursements This Page (optional) .....

275.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

## **A. PCS SPRINT**

Mailing Address P O Box 62012

City  
Baltimore

State  
MD

Zip Code  
21264-2012

Purpose of Disbursement

Director's Cell Phone

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: SB21B.7770**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.06

Full Name (Last, First, Middle Initial)

## **B. Parking St. Joseph's**

Mailing Address P. O. Box 70915

City  
Washington

State  
DC

Zip Code  
20024

Purpose of Disbursement

Employee Parking

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: SB21B.7773**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

630.00

Full Name (Last, First, Middle Initial)

## **C. VFW National Headquarters**

Mailing Address 406 West 34th Street

City  
Kansas City

State  
MO

Zip Code  
64111

Purpose of Disbursement

Employee salary, benefits, and misc.

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: SB21B.7757**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5870.52

**SUBTOTAL** of Disbursements This Page (optional) .....

6595.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** VFW National Headquarters

Mailing Address 406 West 34th Street

City Kansas City State MO Zip Code 64111

Purpose of Disbursement  
December 2006 Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7761

Date of Disbursement

12 / 01 / 2006

Amount of Each Disbursement this Period

1681.01

Full Name (Last, First, Middle Initial)

**B.** VFW National Headquarters

Mailing Address 406 West 34th Street

City Kansas City State MO Zip Code 64111

Purpose of Disbursement  
Employee Salary, benefits, and misc.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7771

Date of Disbursement

12 / 27 / 2006

Amount of Each Disbursement this Period

4316.19

Full Name (Last, First, Middle Initial)

**C.** National Association Wachovia Bank

Mailing Address NC8502  
P.O. Box 563966

City Charlotte State NC Zip Code 28262-3966

Purpose of Disbursement  
Bank Service Charge 11-06

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7786

Date of Disbursement

11 / 30 / 2006

Amount of Each Disbursement this Period

125.50

**SUBTOTAL** of Disbursements This Page (optional) .....

6122.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

VFW Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** National Association Wachovia Bank

Mailing Address NC8502  
P.O. Box 563966

City State Zip Code  
Charlotte NC 28262-3966

Purpose of Disbursement  
Service charge 12-06

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7787

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	6

Amount of Each Disbursement this Period

63.50

**SUBTOTAL** of Disbursements This Page (optional) .....

63.50

**TOTAL** This Period (last page this line number only) .....

16040.98